State of Minnesota	District Court Judicial District
County of	
County of	Court File No
	Case Type: 14, Conservatorship
In Re: Conservatorship	
<b>Protected Person</b>	(File as a Financial Source Document with Form 11.2)
To: Name and Address of E	Broker / Financial Advisor / Financial Institution:
and other securities for the a	bove named protected person. Please provide me with verification of the following date:
Dated:	
	Signature of Conservator
	Conservator's name and address:
I certify that the foregoing	stocks and other securities were on deposit as shown by the records of this elow. The stocks and other securities listed below were accurate as of this
	Account Information:
Number of Na Units/Shares	ame of Stock or Account Title
Note: Attach a separate si	heet if more space is needed to list account information / remarks.
By:	
SIGNATURE OF CERTIFY BROKER / FINANCIAL A FINANCIAL INSTITUTIO	DVISOR /
TITLE OF CERTIFYING C (Please affix official seal on	

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